

**HONOLULU ETHICS COMMISSION**

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768

Email: ethics@honolulu.govWebsite: <http://www.honolulu.gov/ethics/>

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HONOLULU
ETHICS COMMISSION
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12-17-19

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2019 REGISTRATIONLobbyist Registration
(Type or Print Clearly)**PART I LOBBYIST**

NAME (Last) (First) (Middle)

Tanida, Corie I.

LOBBYIST FIRM/EMPLOYER (if applicable)

Common Cause Hawaii

TELEPHONE

(808) 275-6275

MAILING ADDRESS (No. and Street or P.O. Box)

307A Kamani St.

FAX

EMAIL hawaii@commoncause.org

(City)

Honolulu

(State)

HI

(Zip Code)

96813

PART II.A ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)

Common Cause

TELEPHONE

(202)833-1200

MAILING ADDRESS (No. and Street or P.O. Box)

805 15th St., NW, Ste 800

FAX

EMAIL

(City)

Washington

(State)

DC

(Zip Code)

20005

ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)

5000 (in Hawaii)

☐ Not Applicable

METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS

☒ Not Applicable**PART II.B NO LONGER LOBBYING**☒ I am no longer authorized to lobby on behalf of the organization in Part II.A

DATE 12/15/2018

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input checked="" type="checkbox"/> Other (indicate below): <u>Good government</u>		

PART IV LOBBYIST CERTIFICATION

I hereby certify that the foregoing statements are true and correct.

Cruz I. Tanida
LOBBYIST SIGNATURE

12/18/18
DATE

Subscribed and sworn to before me

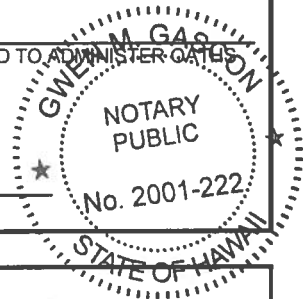
This 16 day of December, 2018.

By: Gwen M. Gasen

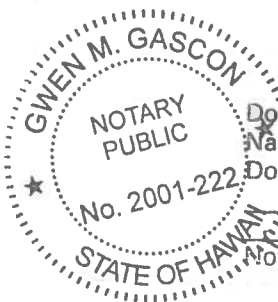
NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS

My commission expires:

6/03/2021

**PART V AUTHORIZATION TO LOBBY**

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
NAME OF ORGANIZATION (if applicable)		TELEPHONE
MAILING ADDRESS (No. and Street or P.O. Box)		FAX
		EMAIL
(City)	(State)	(Zip Code)
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.		
(Signature of Authorizing Officer or Person Represented)		(Date)



Doc. Date: 12/10/18 # Pages: 2
Name: GWEN M. GASCON First Circuit
Doc. Description: Registration
Gwen M. Gascon 12/10/18
Notary Signature Date